
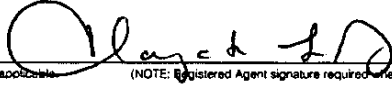
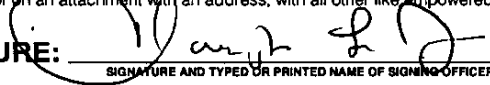


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90157 028 ***150.00

DOCUMENT # P04000137347			
1. Entity Name ALL GRAND GARAGE & ROLLING DOOR SERVICE OF SO. FL. INC.			
Principal Place of Business 5531 NW 112 AVENUE #114 MIAMI, FL 33178		Mailing Address 5531 NW 112 AVENUE #114 MIAMI, FL 33178	
2. Principal Place of Business 9901 NW 80 Ave.		3. Mailing Address 9901 NW 80 Ave	
Suite, Apt. #, etc. 3A		Suite, Apt. #, etc. 3A	
City & State Hialeah Gardens, FL		City & State Hialeah Gardens, FL	
Zip 33016		Country USA	
4. FEI Number 20-1717883		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LUGO, MARGARITA 5531 NW 112 AVENUE #114 MIAMI, FL 33178		7. Name and Address of New Registered Agent Name: Lugo, Margarite Street Address (P.O. Box Number is Not Acceptable): 13868 SW 53 Street City: Miramar FL Zip Code: 33027	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Margarita Lugo</u>  DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS LUGO, MARGARITA 5531 NW 112 AVENUE #114 MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13868 SW 53 Street Miramar, FL 33027
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT PAREDES, REYNALDO S 5531 NW 112 AVENUE #114 MIAMI, FL 33178 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13868 SW 53 Street Miramar, FL 33027
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>4/14/05</u>	Daytime Phone #: <u>305 819 0805</u>